

March 3, 2009

# Montana Healthcare Programs Notice

## Durable Medical Equipment

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### Medicaid Policy on 36-Month Oxygen Cap

Effective January 1, 2009

The Department has evaluated Medicare's policy regarding the 36-month cap for oxygen and has considered the input from DME workgroup members. To preserve client access, Montana Medicaid will not be following the 36-month cap on oxygen for Medicaid-only clients. This policy will include eligible Medicaid nursing home dual-eligible (both Medicare and Medicaid coverage) clients for Medicare non-covered oxygen.

Please note: Medicaid pays only Medicare co-insurance and deductibles up to the Medicaid allowable for QMB-only clients. The Department will follow established policy for this client group; for example, once the 36-month cap starts, Medicare rules apply and the Department will follow.

Dual-eligible clients will follow the 36-month cap as outlined by Medicare rules.

Medicaid clients with QI-1 and SLMB do not have Medicaid oxygen coverage.

Medicaid will follow all of the Medicare oxygen changes outlined in the Medicare Improvements for Patients and Providers Act (MIPPA) of 2008 except for the 36-month cap as stated above.

### Contact Information

For Medicare criteria visit the CMS website:

**<http://www.noridianmedicare.com>**

For claims questions or additional information, contact Fran O'Hara, DME Program Officer, at (406) 444-5296 or Provider Relations:

**Provider Relations toll-free in- and out-of-state: 1-800-624-3958**

**Helena: (406) 442-1837**

**E-mail: [MTPRHelpdesk@ACS-inc.com](mailto:MTPRHelpdesk@ACS-inc.com)**

Visit the Provider Information website:

**<http://www.mtmedicaid.org>**

Visit the CMS website:

**[www.cms.hhs.gov](http://www.cms.hhs.gov)**